

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND			
1 Date of Request: 10/13/05		2 Serial/Patent # 10/516976	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
<input checked="" type="checkbox"/> Filing			12/6/04
<input type="checkbox"/> Amendment			\$
<input type="checkbox"/> Extension of Time			\$
<input type="checkbox"/> Notice of Appeal/Appeal			\$
<input type="checkbox"/> Petition			\$
<input type="checkbox"/> Issue			\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/> Maintenance			\$
<input type="checkbox"/> Assignment			\$
<input type="checkbox"/> Other			\$
		7 TOTAL AMOUNT OF REFUND \$ 555.00	
		8 TO BE REFUNDED BY:	
10 REASON:		<input type="checkbox"/> Treasury Check	
<input checked="" type="checkbox"/> Overpayment		<input checked="" type="checkbox"/> Credit Deposit A/C #:	
<input type="checkbox"/> Duplicate Payment		9 19--4675	
<input type="checkbox"/> No Fee Due (Explanation):			
11 REFUND REQUESTED BY: Charita Burt			
TYPED/PRINTED NAME: Charita Burt		TITLE: Paralegal	
SIGNATURE: [Signature]		PHONE: 308 9140x207	
OFFICE: [Signature]			
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****			
APPROVED: _____		DATE: _____	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: